

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
STATE OF SOUTH CAROLINA		Bureau of Vital Statistics		22402	
State Board of Health		Registration District No. 2nd 9th		Registered No. 231	
County of Greenville		Inc. Town of .....		(For use of Local Registrar)	
Township of .....		City of .....		(No. 14.4 9th St.; ..... Ward)	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(2) Full Name of Child Katie Louise Riddle		If child is not yet named, make supplemental report as directed	
(3) BOY OR GIRL Girl	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? Yes	(7) DATE OF BIRTH June 28, 1922	
FATHER.			MOTHER.		
(8) FULL NAME Lawrence R. Riddle			(14) NAME BEFORE MARRIAGE Rose Helen McPulley		
(9) PRESENT POSTOFFICE OF FATHER Greenville S.			(15) PRESENT POSTOFFICE OF MOTHER Greenville S.		
(10) COLOR OR RACE white			(16) COLOR OR RACE white		
(11) AGE AT LAST BIRTHDAY 29			(17) AGE AT LAST BIRTHDAY 29		
(12) BIRTHPLACE Laurens, S.C.			(18) BIRTHPLACE Thomasburg, Ga.		
(13) OCCUPATION Painter			(19) OCCUPATION H. W.		
(20) Number of children born to mother, including present birth 6			(21) Number of children of this mother now living, including present birth 5		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was born alive at 11 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) J. H. Anderson					
(24) State whether Physician or Midwife M. D.					
(25) Address of Physician or Midwife Greenville					
Given name added from a supplemental report			(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)		
....., 19 .....			(27) Filed July 1, 1922		
Registrar			(28) Local Registrar		
*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.					

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